

WJEC Level 2 Health and Social Care: Principles and Contexts

Approved by Qualifications Wales

This qualification forms part of the new suite of Health and Social Care, and Childcare qualifications in Wales provided by City & Guilds/WJEC.

This Qualifications Wales regulated qualification is not available to centres in England.

Specification

Version 2 September 2023



SUMMARY OF AMENDMENTS

Version	Description	Page number
2	The release date for Assignment 1 studies has been updated from March to the first Monday in January.	9, 21, 33

Contents

Qualification at a glance	4
1. Introduction	5
About the qualification	5
Structure	7
Guided Learning Hours (GLH), Total Qualification Time (TQT) and Credit	8
2. Summary of assessment	9
Assessment objectives	9
3. Units	11
Unit format	11
4. Centre requirements	30
Centre and qualification approval	30
Centre staffing	30
5. Delivering, assessing and quality assuring the qualification	31
Learner entry requirements	31
Age restrictions	31
Initial assessment and induction	31
Support materials	32
Making entries	32
Arrangements for non-examination assessment (NEA)	33
Grading, awarding and reporting	37
Post-results services	38
Resits	38
Appendix A: NEA Assignment for Unit 2	39
Appendix B: NEA Mark scheme for Unit 2 - Assignment 2	41

Qualification at a glance

Subject area	Health and Social Care
WJEC number	5972Q0
QiW number	C00/1253/1
Age group approved	16+
Assessment	40% external assessment 60% internal non-examination assessment
Approvals	Centre and qualification approval is required
Related documents	Sample Assessment Materials Guidance for Teaching Learner Guide Centre Administration Guide A Good Practice Guide to Work Placements Sector Engagement and Work Placement Record
Registration and certification	Consult the Consortium website for details www.healthandcarelearning.wales

1. Introduction

About the qualification

Who is the qualification for?	This qualification is designed for post-16 learners who are interested in learning more about the health and social care sectors.
What does the qualification cover?	<p>The qualification enables learners to develop and demonstrate their knowledge, skills and understanding within the context of health and social care practice.</p> <p>Completion of this qualification requires learners to undertake a minimum of ten days of sector engagement, of which at least five days (30 hours) must be spent undertaking a work placement.</p> <p>The knowledge, understanding and skills a learner is required to achieve within this qualification builds on the content of the Health and Social Care: Core qualification. It is strongly recommended that a learner undertaking this qualification has completed or is currently undertaking the Health and Social Care: Core qualification. Please note that it is a requirement of Social Care Wales that an individual working within the social care sector will need the Health and Social Care: Core qualification to work within specific job roles. For more information on requirements to work within the Social Care sector, please refer to Social Care Wales' website:</p> <p>https://socialcare.wales/resources/qualification-framework-for-the-social-care-sector-in-wales</p>

What opportunities for progression are there?	<p>This qualification supports progression to further learning/training and/or qualifications, including:</p> <ul style="list-style-type: none">• Level 3 Certificate and Diploma in Health and Social Care: Principles and Contexts• GCE Health and Social Care, and Childcare• Level 2 Health and Social Care: Practice (Adults)• Level 3 Health and Social Care: Practice (Adults)• Level 3 Health and Social Care: Practice (Children and Young People)• Level 2 Children’s Care Play, Learning and Development: Practice and Theory• Level 3 Children’s Care Play, Learning and Development: Practice and Theory• Apprenticeships in Health and Social Care.
Who did we develop the qualification with?	<p>This qualification has been developed by the Consortium¹ in conjunction with stakeholders from the health and social care sectors. This includes Social Care Wales, NHS Health Education and Improvement Wales, tutors, teachers and workplace assessors.</p>

¹ The Consortium consist of City & Guilds of London Institute and WJEC who worked jointly to develop and deliver all of the qualifications in the Health and Social Care and CCPLD suite.

Qualification aims and objectives

The Level 2 Health and Social Care: Principles and Contexts qualification enables learners to develop and demonstrate their knowledge, skills and understanding within the context of health and social care services. In particular, learners will be able to demonstrate that they:

- understand the core principles and values which underpin health and social care practice and apply them to a range of health and social care contexts
- understand the ways in which individuals' unique needs can be identified and responded to
- reflect on how person-centred approaches are adopted in health and social care contexts
- understand job role and function within the health and social care sector
- understand the ways in which different settings, agencies and services work together to provide care for individuals
- use literacy, numeracy and digital competency skills as appropriate within their study.

Structure

The Level 2 Health and Social Care: Principles and Contexts qualification is a unitised qualification which allows for an element of staged assessment. It is made up of two mandatory units:

Unit number	Unit title	GLH
001	Promoting health and well-being throughout the life stages	80
002	Health and social care to support outcome-focused provision for person-centred care	120
	Total GLH	200

Whilst the assessment for each unit assesses the content specific to that unit, learners will be provided with the opportunity to make connections between, and demonstrate their knowledge and understanding of, elements from across the full course of study.

Guided Learning Hours (GLH), Total Qualification Time (TQT) and Credit

Guided learning means activities such as classroom-based learning, tutorials and online learning which is directly supervised by a teacher, tutor or invigilator. It also includes all forms of assessment which take place under the immediate guidance or supervision of a teacher, supervisor or invigilator.

The Guided Learning Hours (GLH) assigned to Level 2 Health and Social Care: Principles and Contexts is 200 hours.

GLH has been allocated per unit to support delivery. It is acceptable for centres to deliver this qualification holistically and, therefore, hours per unit are a recommendation only.

Total Qualification Time (TQT) is the total amount of time, in hours, expected to be spent by a learner to achieve a qualification. It includes both the Guided Learning Hours and additional time spent in preparation, study and some formative assessment activities.

The Total Qualification Time (TQT) for this qualification has been calculated as 300 hours. This includes:

- 200 hours of guided learning
- a mandatory minimum of ten days (60 hours) sector engagement of which a minimum of 30 hours (5 days x 6 hours or 30 hours equivalent) must be spent on work placement
- and an additional 40 hours of self-directed study which may include:
 - additional assignments and tasks set by the tutor (homework)
 - independent use of online learning resources
 - completion of independent research including reading of publications and reports relating to the sector.

The credit value for this qualification is 30. Credit is calculated using the formula that equates to the TQT value divided by 10.

2. Summary of assessment

Unit 1: Promoting health and well-being throughout the life stages

External assessment

Written examination

40% of qualification

90 minutes

80 marks 100 UMS

An examination (either taken on-screen or as a written paper) comprising a range of question types to assess all specification content related to health and well-being throughout the life stages.

All questions are compulsory.

Unit 2: Health and social care to support outcome-focused provision for person-centred care

Internal non-examination assessment

60% of qualification

10 hours

120 marks 150 UMS

Two externally set, internally assessed assignments.

Assignment 1 includes a choice of two case studies and is available to centres from the WJEC secure website each year on the first Monday in January (from 2020 onwards).

Assignment 2 is published in Appendix A and requires learners to draw on the knowledge and understanding gained through their sector engagement.

Assessment objectives

Assessment objectives (AOs) refer to the skills that learners need to demonstrate in their responses to questions in an examination or assignment. The Level 2 Health and Social Care: Principles and Contexts qualification has three assessment objectives:

- demonstrate knowledge and understanding of health and social care principles and contexts
- apply knowledge and understanding of health and social care principles and contexts
- analyse and reflect on aspects of health and social care principles and contexts.

Both the internal and external assessments will target these assessment objectives in line with the following weightings:

Objective	Requirements	Weightings
AO1	Demonstrate knowledge and understanding of health and social care principles and contexts	35-40%
AO2	Apply knowledge and understanding of health and social care principles and contexts	38-42%
AO3	Analyse and reflect on aspects of health and social care principles and contexts	21-25%

Breakdown of unit assessments

Unit	Time	Qualification weighting	Raw marks	AO mark		AO weighting	
1	1 hour 30 minutes	40%	80	AO1	28-32	AO1	35-40%
				AO2	32-34	AO2	38-42%
				AO3	18-20	AO3	22-25%
2	10 hours	60%	120	AO1	42	AO1	35%
				AO2	48	AO2	40%
				AO3	30	AO3	25%

3. Units

Unit format

The following summary provides guidance on the different elements that are found within the units and information on unit delivery.

Unit title	Summarises, in a concise manner, the content of the unit.
Guided Learning Hours (GLH)	Guided learning means activities such as classroom-based learning, tutorials and online learning, which is directly supervised by a teacher, tutor or invigilator. It also includes all forms of assessment which take place under the immediate guidance or supervision of a teacher, supervisor or invigilator. GLH has been allocated per unit to support delivery. It is acceptable for centres to deliver this qualification holistically and, therefore, hours per unit are a recommendation only.
Overview of unit	Provides a summary of the unit content. It sets the context of the unit and highlights the purpose of the learning in the unit.
Assessment	Summarises the assessment method for the unit.
Skills development	Identifies opportunities for the development of skills.
Topic area	Provides a concise description of the knowledge and understanding the learner will acquire.
Taught content	Specifies the content which must be taught to all learners.

Unit 1

Unit title	Promoting health and well-being throughout the life stages
GLH	80
Overview of unit	<p>Through this unit, learners will gain knowledge and understanding of:</p> <ol style="list-style-type: none"> 1.1 Key physical, intellectual, emotional and social aspects that affect growth and development across the lifespan of individuals. 1.2 The influence of life factors, lifestyle choices and life events on growth, health and well-being. 1.3 The factors that shape self-concept. 1.4 The role and purpose of promoting health and well-being. <p>It is strongly recommended that teachers teach topic areas 1.1 and 1.2 holistically</p>
Assessment	<p>This unit is externally assessed through a written examination (or on-screen) which contributes 40% to the overall qualification grade.</p> <p>All content may be assessed through any of the three assessment objectives.</p>
Skills development	<p>The study of this unit will generate opportunities for the development of skills.</p> <p>Examples of such opportunities are:</p> <ul style="list-style-type: none"> • digital literacy and numeracy: through individual online research into the key patterns of development across the lifespan • critical thinking and problem solving: in the consideration of how an individual's life choices and experience of life events impact on development • planning and organisation: when investigating current government health and well-being initiatives • personal planning and effectiveness: in their preparation for assessment.

Topic Area	Taught Content
<p>1.1 Key physical, intellectual, emotional and social aspects that affect growth and development across the lifespan of individuals</p>	<p>In order to know and understand aspects that affect growth and development across the lifespan of individuals, learners should have fundamental knowledge and understanding of the expected milestones of physical, intellectual (cognitive), language, emotional and social development that take place in each of the main stages in the lifespan:</p> <ul style="list-style-type: none"> • Infancy – 0-2 years • Childhood – 3-12 years • Adolescence – 13-19 years • Adulthood – 20-64 years • Later adulthood – 65+ years <p>Physical aspects of development</p> <p>Ongoing from birth through to end of life, to include:</p> <ul style="list-style-type: none"> • Infancy and childhood: changes to growth: height, weight, use of centile charts and the Schedule of Growing Skills, development of teeth, visual acuity and hearing, acquisition of skills: gross motor skills e.g. sitting, crawling, standing and walking; fine motor skills e.g. hand eye co-ordination, development of good hygiene, toilet training, independence, hydration and nutrition, gender identification and development. • Adolescence: puberty and the different changes that take place in girls/boys, growth spurt, hormones, menstruation • Adulthood: <ul style="list-style-type: none"> • female changes in adulthood: during pregnancy, during the menopause, weight gain, decrease in Basal Metabolic Rate (BMR) • male changes in adulthood: improved muscular strength, weight gain, decrease in Basal Metabolic Rate (BMR), reproductive ability starts to decline • Later adulthood: ageing process: hair loss, change to skin, loss of muscle tone and strength, mobility, decline in gross and fine motor skills, eyesight and hearing may deteriorate. <p>Intellectual (cognitive) aspects of development</p> <p>Ongoing from birth through to end of life, to include:</p> <ul style="list-style-type: none"> • Infancy and childhood: how children learn through play <ul style="list-style-type: none"> • problem solving e.g. decision making • thinking skills, concrete operations e.g. making sense of the world and ‘why?’ questions • concepts e.g. temperature, colour, shape, size, length, distance, time, spatial awareness • language acquisition, role of language skills, communication skills, learning to read. • Adolescence Adulthood: advanced thinking and knowledge skills, decision making, continued intellectual development and maturity, generic reasoning, formal logic, academic achievement and employment opportunities, mental

Topic Area	Taught Content
	<p>capacity and memory development, further development of language skills (bilingual, multilingual) importance of recognising, using and supporting the Welsh language</p> <ul style="list-style-type: none"> • Later adulthood: advanced thinking and knowledge skills continue. During retirement, individuals may share newly gained knowledge with each other, such as learning a new language to aid memory. The effect of ageing on memory and recall, psychological effect of skill loss.
	<p>Emotional aspects of development Ongoing from birth through to end of life to include:</p> <ul style="list-style-type: none"> • Infancy and Childhood: bonding, positive or insecure attachments, socialisation, self-concept, self-esteem, self-confidence • Adolescence: development of feelings, security and relationships • Adulthood: security and relationships, forming intimate relationships, contentment • Later Adulthood: continued contentment; effects of increased dependency on others. <p>Social aspects of development Ongoing from birth through to end of life, to include:</p> <ul style="list-style-type: none"> • Infancy and Childhood: importance of play, stages of play, social skills and moral development e.g. right from wrong, truth from lies • Adolescence: friendship groups, relationships, peer pressure, balancing school work and play • Adulthood: interactions and roles: work, family and social relationships, independence, work-life balance, new relationships • Later Adulthood: the effect of age on relationships: loss, loneliness.

Topic Area	Taught content
<p>1.2 The influence of life factors, lifestyle choices and life events on growth, health and well-being</p>	<p>Learners should know and understand the influence of life factors, lifestyle choices and life events (positive or negative) on growth, health and well-being, and how these factors may interrelate.</p> <p>Life factors To include:</p> <ul style="list-style-type: none"> • culture and religion: cultural, ethnicity and racial diversity, religion and beliefs, discrimination and prejudice • economic status: affluency, employment, unemployment, poverty, low income • educational experiences: play and learning/stimulation, support and guidance through education, physical and outdoor education, level of education and qualifications, impact on confidence and self-esteem, bilingualism, more able and talented, language disorders, behavioural conditions • family structure: type and size, traditional or alternative, quality of family and other relationships • home environment: demographic, social, emotional and environmental factors, quality of living accommodation and facilities • long-term and life-limiting conditions: <ul style="list-style-type: none"> • congenital conditions, e.g. Down's syndrome and spina bifida • acute deterioration conditions, e.g. sepsis, dementia • genetic inheritance conditions/pre-disposition to certain medical conditions, e.g. cystic fibrosis • chronic diseases, e.g. arthritis, asthma • physical disabilities, e.g. cerebral palsy • accidents that may affect health • conditions prevalent in Wales, e.g. autism spectrum disorders, coronary heart disease, respiratory disease, cancers • behavioural disorders, e.g. attention deficit hyperactivity disorder (ADHD) • mental health: mental illness, eating disorders, depression, anxiety • nutrition and hydration: breastfeeding, bottle feeding, weaning, obesity, diet (balanced and unbalanced diets) food intolerances and allergies, special diets, malnutrition, food poverty, supporting nutritional needs in care at home, care homes and hospitals • opportunities: to take part in activities such as play, recreation and sport to support growth, health and well-being, links to social networks and support • physical activity: being fit and exercising, amount and type of activity, benefits of exercise versus risks of little or no exercise, relaxation

Topic Area	Taught content
	<ul style="list-style-type: none"> • physical health: demographic and environmental influences, healthy weight and BMI, immunisations, check-ups at dentist, attending screening appointments, regular eye tests, sensory loss (hearing and vision), diseases, impairments, congenital conditions • pollution: air and noise pollution, sanitation and water, effect on physical conditions such as respiratory disorders, cardiovascular disorders, allergies, stress and personal hygiene and how they affect well-being • sexuality: LGBT. <p>Lifestyle choices To include:</p> <ul style="list-style-type: none"> • influence of others: role models, peer pressure, social media, involvement in community-based voluntary activities • involvement in crime: gangs, violence, intimidation • material possessions: wants versus needs, material deprivation • sexuality: celibacy and monogamy • smoking: tobacco and vape products • substance misuse: alcohol, illegal drugs, prescription medication and new psychoactive substances, legal highs, including parental misuse • use of technology: social networking. <p>Life events To include:</p> <ul style="list-style-type: none"> • family: birth, leaving home, marriage, starting a family, adult relationships, divorce, retirement, loss of family, death, bereavement • abuse: emotional, physical, sexual, psychological, verbal, domestic, financial and neglect – to include controlling/coercive behaviour in family and/or personal, intimate sexual relationships • adverse childhood experiences (ACEs): traumatic experiences that occur during childhood/adolescence and may impact on adulthood • education: starting/changing schools, further education (FE), higher education (HE), adult education and lifelong learning • employment/unemployment: starting employment, redundancy, skill level, pay income support, benefits, lack of employment opportunities • ill health: infirmity, being or becoming a carer or young carer to a family member, moving into care.

Topic Area	Taught content
	<p>Learners should know and understand the impact on individual(s) of not reaching developmental milestones due to the influence of life factors, lifestyle choices and life events on their growth, health and well-being.</p> <p>To include:</p> <ul style="list-style-type: none"> • stigma • labelling • referrals and access to services • inequalities. <p>Learners should know and understand the health and social care services available to support individual(s) who do not reach their developmental milestones due to the influence of life factors, lifestyle choices and life events on their growth, health and well-being.</p> <p>To include:</p> <ul style="list-style-type: none"> • advocacy • assessment: care and support plans • coaching and support therapies • direct support for care experienced children and young people • financial support: family members who may give up work to care for an individual • professional support: child and adolescent mental health services (CAMHS), counselling • specialist therapies, e.g. speech and language therapy, physiotherapy, occupational therapy to support cognitive development (or talking therapies), physical, sensory and motor skills and the enhancement of self-esteem and sense of accomplishment • support groups, mindfulness, community arts • specific training for individuals with additional learning needs or mental health issues, e.g. social skills, personal care skills and basic work skills.

Topic Area	Taught content
<p>1.3 The factors that shape self-concept</p>	<p>Learners should know and understand the importance of active participation, inclusion, resilience and self-concept in supporting individuals with coping and reacting to life events and how they contribute to ongoing growth and development. To include:</p> <ul style="list-style-type: none"> • active participation: enables individuals to be included in their care and have a greater say in how they live their life in ways that matter to them • inclusion: all individuals, regardless of their abilities, disabilities, or health care needs, have equal access and opportunities • resilience: an individual's ability to successfully adapt to life tasks in the face of social disadvantage or other adverse conditions such as family or relationship problems, health problems, workplace and financial worries • self-concept: the view you have of yourself (self-image), how much value you place on yourself (self-esteem or self-worth) what you wish you were really like (ideal self). <p>Learners should know and understand the positive and negative factors that may affect self-concept and how this can be supported. To include:</p> <ul style="list-style-type: none"> • abuse • age • appearance • culture • education • emotional development and emotional intelligence • environment • gender and sexual orientation • impact of discrimination • income • negative media • relationships with others: carers/family • sense of security: a psychological sense that everything will be all right • social media • socialisation: relationships with others, carers/family, friends • stereotyping. <p>Learners should know and understand that individuals can be encouraged to develop and use resilience and positive self-concept to achieve their personal outcomes in different settings and situations. To include:</p> <ul style="list-style-type: none"> • engagement with others • participating in new activities • praise and rewards • understanding limits and boundaries.

Topic Area	Taught content
<p>1.4 The role and purpose of promoting health and well-being</p>	<p>Learners should know and understand the role and purpose of promoting health and well-being across the lifespan. To include: Role: to raise awareness of health and well-being issues Purpose: to improve an individual's behaviour and lifestyle choices which, if sustained, will have a long-term impact on their health, well-being and resilience Benefits: to reduce risks to health and well-being, improve social mobility and employment opportunities and reduce health and social care costs.</p> <p>Learners should know and understand how to support individuals to take responsibility for their own health and well-being. To include:</p> <ul style="list-style-type: none"> • encouraging individuals to utilise their own strengths and the strengths of their informal networks • educating and providing individuals with information and advice about health and well-being to enable them to make positive lifestyle choices in relation to specific health and well-being risks • promotion campaigns and initiatives targeted at raising awareness of health and well-being related issues with specific audiences at both local and national level, such as Public Health Wales, local authorities and the third sector • how the Welsh Government works to improve health and well-being and reduce inequalities in health through legislation such as Well-being of Future Generations Act 2015 and the Social Services and Well-being (Wales) Act 2014. <p>Learners should know and understand ways of promoting health and well-being. To include: Health campaigns: safe sexual practices, healthy eating, exercise, drug awareness, alcohol awareness, cancer awareness, smoking, medical conditions (diabetes, cardiovascular disease, strokes) and mental health awareness (stress, depression).</p> <p>Well-being campaigns: personal safety, road safety, keeping warm in winter, fire safety (smoke alarms), social isolation, modern slavery, Rent Smart Wales, dementia-friendly towns and businesses, Live Fear Free/Ask and Act (domestic violence), Talk to Me (suicide prevention).</p>

Topic Area	Taught content
	<p>Learners should know and understand the different types of health promotion materials and methods that are used in promoting health and well-being.</p> <p>To include:</p> <ul style="list-style-type: none"> • leaflets and posters • advertisements: tv, radio, magazines and newspapers • internet pop-ups, social media • websites. <p>Learners should know and understand the role, purpose and challenges of current health and well-being initiatives.</p> <p>To include:</p> <ul style="list-style-type: none"> • antibiotic awareness • flu vaccinations • school health initiatives • anti-smoking • suicide and self-harm prevention • screening services and vaccinations • social isolation • toothbrushing. <p>Campaigns and initiatives listed above are time sensitive. A list of the latest Welsh Government health and well-being initiatives are available at https://www.healthandcarelearning.wales/. Centres are strongly advised to deliver this list when planning their teaching and learning programme to ensure that they are referring to the most recent campaigns and initiatives.</p>

Unit 2

Unit title	Health and social care to support outcome-focused provision for person-centred care
GLH	120
Overview of unit:	<p>Through this unit learners will gain knowledge and understanding of:</p> <ul style="list-style-type: none"> 2.1 The range of individual needs across the lifespan. 2.2 The variety of opportunities and challenges, both locally and across Wales. 2.3 The roles and responsibilities of workers in the health and social care sector. 2.4 Legislation and principles of care and support. <p>This unit requires learners to complete a mandatory 10 days of sector engagement, or the equivalent split over 60 hours, 5 days or 30 hours of which must be spent in a work placement. Please refer to Section 5 for further information on sector engagement and work placements.</p> <p>Learners must complete the sector engagement and work placement record available from the qualification page on the www.healthandcarelearning.wales website to evidence how sector engagement hours have been accumulated.</p> <p>Learners should also be encouraged to keep a reflective diary/log of their sector engagement and work placement activities. Information for learners and a template for the reflective diary is available in the Learner Guide available from the www.healthandcarelearning.wales.</p>
Assessment:	<p>This unit is internally assessed through two set assignments.</p> <p>Assignment 1 includes a choice of two case studies and is available to centres from the WJEC secure website on the first Monday in January each year (from 2020 onwards). Each case study provides learners with an insight into outcome-focused provision and employment opportunities in the health and social care sector. Learners must choose one case study and answer the related tasks.</p> <p>Assignment 2 is published in Appendix A. Assignment 2 requires learners to draw on the knowledge and understanding gained through their sector engagement.</p> <p>This assessment contributes 60% to the overall qualification grade. All content may be assessed through any of the three assessment objectives.</p>

Skills development

The study of this unit will generate opportunities for the development of skills.

Examples of such opportunities are:

- **digital literacy and numeracy:** through individual research into the different types of health, care and support provision available to individuals in Wales
- **critical thinking and problem solving:** in consideration of the way that the sectors work together in partnership to provide care and support to individuals to help them achieve their outcomes
- **planning and organisation:** through sector engagement in preparation for their NEA task
- **personal planning and effectiveness:** in preparation for assessment.

Topic area	Taught content
<p>2.1 The range of individual needs across the lifespan</p>	<p>Learners should know and understand key well-established theories and how they impact on care needs, outcomes and development across the lifespan.</p> <p>To include:</p> <ul style="list-style-type: none"> • Maslow: an individual's behaviour is based on their needs; satisfaction of such needs influences their behaviour • Erikson: eight stages of psychosocial development. <p>Learners should know and understand a range of fundamental human needs across the lifespan.</p> <p>To include:</p> <ul style="list-style-type: none"> • affection: respect, generosity, family, friendships, relationships • creation: abilities, skills • freedom: autonomy, self-esteem, equality • identity: sense of belonging, self-esteem, values • leisure: exercise, relaxation, enjoyment • participation: responsibilities, rights • protection: care, adaptability, independence • subsistence: physical and mental health and well-being, food, shelter, work • understanding: education, curiosity, intuition. <p>Learners should know and understand that physical care and emotional support needs change throughout the lifespan</p> <p>To include:</p> <ul style="list-style-type: none"> • changes to needs due to predictable/unpredictable life events e.g. transition from nursery to school to university, employment/unemployment, having/not having children, bereavement • changes to needs for individuals living with: <ul style="list-style-type: none"> • chronic diseases • physical disabilities • mental ill health • accidents that affect health. • individuals diagnosed with a life-threatening or life-limiting condition, through to care in the last hours of life, to include palliative care and end of life care.

Topic area	Taught content
<p>2.2 The variety of opportunities and challenges both locally and across Wales</p>	<p>Learners should know and understand the different ways that care and support is provided for individuals across all life stages both locally and across Wales.</p> <p>To include:</p> <ul style="list-style-type: none"> • Health care, such as: primary health care and support, e.g. dental care, health centres, opticians, pharmacies; secondary health care and support e.g. hospitals, maternity care and support, occupational therapy, physiotherapy • Social care, such as: foster care, residential care (adults and children), child and family support services, youth offending services, youth work, support groups, homeless shelters, day centres, refuges, counselling services, advice bureaux, supported living accommodation, lunch clubs, domiciliary care. <p>Learners should know and understand how the health and social care sectors work together in partnership with individuals to provide care and support to ensure their outcomes are achieved.</p> <p>To include:</p> <p>Partnership working: with individuals, care forums, self-help groups, community led activities, commissioned services, unpaid carers, mixed economy of care (statutory, independent and third sector), multi-agency working, multi-disciplinary team.</p> <p>Learners should know and understand how individuals access opportunities to support their health and well-being, how these can change throughout the life stages and the challenges they may face.</p> <p>To include:</p> <p>Accessing opportunities:</p> <ul style="list-style-type: none"> • individual choice: outcome-focused, no longer service-led • initial assessment: assessments carried out to establish care and support needs and choices of the individual • person-centred: agreeing with the individual ways to support the achievement of key outcomes, e.g. 'What Matters' conversations • multi-agency working: (where appropriate) to achieve personal outcomes • the role of, and rights to, advocacy. <p>Challenges individuals may face:</p> <ul style="list-style-type: none"> • austerity: inadequate funding or provision of services in parts of Wales • access problems, eligibility criteria • under-staffed workforce and insufficient training • lack of information and guidance.

Topic area	Taught content
<p>2.3 The roles and responsibilities of workers in the health and social care sector</p>	<p>Learners should know and understand the roles, responsibilities, career pathways and qualities required of a range of health and social care workers in different settings.</p> <p>Different roles to include:</p> <p>Health care: roles include supporting people's clinical needs for them to achieve personal outcomes. To include: GP, nurse, health visitor, dentist, optician, child and adolescent mental health services (CAMHs), alcohol and drug teams, allied health professions, ancillary/support staff, e.g. medical administrators, receptionists, call centre advice lines.</p> <p>Social care: roles include working alongside/supporting individuals to achieve personal outcomes. There is an important crossover between working in health and working in social care. To include: ancillary, e.g. chef in care home; direct care, e.g. personal assistant, care worker, management; regulated professional roles, e.g. social worker; support roles, e.g. outreach worker.</p> <p>Learners should know and understand the role of health and social care workers in promoting and supporting the health and well-being of individuals in different settings. They should know and understand that this is through maximising opportunities for well-being for the individuals and/or prevention, treatment, diagnosis and management of chronic conditions.</p> <p>Learners should know and understand the responsibilities of workers in the health and social care sector.</p> <p>To include:</p> <ul style="list-style-type: none"> • accountability: taking responsibility for their actions, ensuring they are competent to do the activity they have been asked to perform; failure to do so can result in legal and disciplinary action • compliance: complying with codes of conduct, policies and guidelines for care workers in health and social care • duty of care: a moral or legal obligation to ensure the safety and well-being of others. <p>Learners should know and understand the qualities required to be a health and social care worker.</p> <p>To include:</p> <ul style="list-style-type: none"> • attentiveness • be able to work with others • dedication • empathy • flexibility • honesty

Topic area	Taught content
	<ul style="list-style-type: none"> • passion • patience • positivity • reliability • sense of humour • sensitive to the needs of others • show respect for others • willing to learn. <p>Learners should know and understand that there are many career pathways within health and social care. As part of their sector engagement they should be encouraged to find out about the career routes and the roles that professionals they may encounter have taken.</p> <p>Different settings to include:</p> <p>Health care: GP practices, dental clinics, walk in centres, specialist clinics, e.g. baby clinics, family planning clinics, sexual health clinics, remote clinical advice, hospitals, private practitioners' clinics, e.g. chiropractor, physiotherapist, hospices, nursing care homes, reablement centres.</p> <p>Social care: care at home (including reablement), care homes (nursing or non-nursing), day care settings, foster homes, nursery provision, residential homes (adult and children), respite care, rehabilitation, kinship care, community-based services, shared living, supported living, young offender institutions (YOI), prison services.</p> <p>Learners should know and understand the responsibilities of employers in the health and social care sector.</p> <p>To include:</p> <ul style="list-style-type: none"> • contracts of employment • clearly defining and monitoring the duties care workers will be expected to perform.

Topic area	Taught content
<p>2.4 Legislation and principles of care and support</p>	<p>Learners should know and understand the role of the National Assembly and Welsh Government in setting legislation and policy for health and social care in Wales (devolved authority).</p> <p>Legislation and policies to include:</p> <ul style="list-style-type: none"> • regulatory and advisory legislation • subordinate legislation/secondary legislation • bills and acts. <p>Learners should know and understand how professional practice is supported by the registration of professionals, regulatory bodies and codes of conduct and professional practice.</p> <p>To include:</p> <p>Regulatory bodies</p> <ul style="list-style-type: none"> • Care workers and Professionals: Social Care Wales (SCW), Health and Care Professionals Council (HCPC), General Medical Council (GMC), Nursing and Midwifery Council (NMC), General Dental Council (GDC), General Pharmaceutical Council (GPC) • Services: Healthcare Inspectorate Wales (HIW) and Care Inspectorate Wales (CIW). <p>Codes of conduct and professional practice:</p> <ul style="list-style-type: none"> • Code of Professional Practice for Social Care • Non-regulatory, e.g. NHS Wales Code of Conduct for Healthcare Support Workers in Wales, Code of Practice for NHS Wales Employers • The Residential Child Care Worker: practice guidance for residential child care workers registered with Social Care Wales. <p>Learners should have a fundamental understanding of the following 3 key pieces of legislation and how they underpin the work of health and social care workers in promoting the principles of care in supporting and promoting health and well-being:</p> <ol style="list-style-type: none"> 1. Social Services and Well-being (Wales) Act 2014: The Act provides the legal framework used for improving the well-being of individuals who need care and support, and carers who need support. It is also used for transforming social services in Wales. Its purpose is to impose duties on local authorities, health boards and Welsh ministers which require them to work to promote the well-being of those who need care and support, or carers who need support. <p>The principles of the act include:</p> <ul style="list-style-type: none"> • co-production • multi-agency working and co-operation • prevention and early intervention • voice and control • well-being.

Topic area	Taught content
	<p>2. Well-being of Future Generations (Wales) Act 2015: this Act aims to improve the social, economic, environmental and cultural well-being of Wales now and in the future. It informs the public bodies listed in the Act about their legal obligation to:</p> <ul style="list-style-type: none"> • consider the long-term impact of their decisions • look to prevent problems and take a more joined-up approach • work together with individuals, communities and each other. <p>This Act ensures for the first time, that the public bodies listed must work in a sustainable way.</p> <p>This includes:</p> <ul style="list-style-type: none"> • carrying out sustainable development principles • setting and publishing well-being objectives • working to achieve the seven well-being goals set out in the act. <p>3. Welsh Strategic Framework for the Welsh Language in Health and Social Care (2013): 'More than just words': a strategic framework for Welsh language services in health and social services. The framework outlines the current position and provides a systematic approach to improve services for those who need or choose to receive their care in Welsh.</p> <p>Learners should know and understand the purpose of safeguarding legislation and policies and how they influence person-centred care.</p> <p>To include:</p> <ul style="list-style-type: none"> • All Wales Safeguarding Procedures (2019) • Welsh Government Safeguarding Guidance <p>Further details on the latest Welsh Government legislation and policies are available at https://www.healthandcarelearning.wales/.</p> <p>Learners should know and understand that the principles of care and support are based on the principle of human rights. These arise from current legislation and describe the way health and social care providers should behave towards individuals to achieve their personal outcomes through promoting:</p> <ul style="list-style-type: none"> • choice and control • confidentiality • co-production • dignity • duty of care • effective communication • empathy • equality and inclusion • identification and avoidance of unacceptable practices • person-centred care • positive behavioural support and knowing when the use of restrictive practices is appropriate • respect for the diversity and uniqueness of individuals

Topic area	Taught content
	<ul style="list-style-type: none">• rights of the individual: beliefs, identity, language needs and preferences• safeguarding.

4. Centre requirements

Centre and qualification approval

To offer this qualification, centres will need both centre and qualification approval. Please refer to the Consortium website (www.healthandcarelearning.wales) for further information. Centre staff should familiarise themselves with the structure, content and assessment requirements of the qualification before designing a course programme of learning.

Centre staffing

Staff delivering this qualification and marking the internal assessment must be able to demonstrate that they meet the following requirements. They should:

- be occupationally competent and/or technically knowledgeable in the area for which they are teaching, and this knowledge must be at least to the same level as the training being delivered
- have recent relevant experience in the specific area they will be assessing
- have credible experience of teaching and/or providing training.

The Consortium will provide training and CPD for delivery staff and centre managers to ensure that training and guidance is standardised across the sector. It is the centre's responsibility that delivery staff attend these events, as appropriate.

5. Delivering, assessing and quality assuring the qualification

Learner entry requirements

There are no entry requirements for this qualification. However, centres must ensure that learners have the potential and opportunity to gain the qualification successfully.

Age restrictions

This qualification is approved for learners aged 16+. The Consortium cannot accept any entries for learners under the age of 16.

Initial assessment and induction

An initial assessment of each learner should be made before the start of their programme to identify:

- if the learner has any specific training needs
- support and guidance the learner may need when working towards their qualifications
- any units the learner has already completed, or credit they have accumulated which is relevant to the qualifications
- the appropriate type and level of qualification.

We recommend that centres provide an induction programme so that learners fully understand the requirements of the qualification, their responsibilities as a learner, and the responsibilities of the centre.

Each learner should have access to the Learner Guide available from the Consortium website.

Sector engagement and work placements

Whilst completing these qualifications, learners are required to undertake a minimum of **60 hours (10 days)** of sector engagement, of which a minimum of **30 hours (5 days)** must be spent on work placement. Meaningful sector engagement can take place in a variety of different ways, such as guest lectures related to unit content, employer visits, visits to health and social care settings, coaching and mentoring sessions, befriending, buddy schemes, age-appropriate volunteering, etc, organised by health and social care employers. Further information on how sector engagement could be provided, including case studies of good practice, can be found in the associated guidance for teaching. A 'Good Practice Guide to work placements' is also available from the Consortium website at www.healthandcarelearning.wales.

Sector engagement/work placement record and reflective diary/log

Learners are required to record their sector engagement and work placement experiences in the Sector Engagement and Work Placement Record available from the qualification page of the Consortium website (www.healthandcarelearning.wales). In completing this record, learners should concisely summarise the activity undertaken, the date the activity took place and the duration in hours. For guidance, a completed example is provided in the template. This log must be submitted for moderation in line with the arrangements outlined on page 33.

Learners are strongly advised to keep a reflective diary/log throughout their sector engagement and work placement experience. This could include information on:

- the types of organisations and services that the learner has engaged with and undertaken work placement with
- the types of tasks and activities that the learner has undertaken on a daily basis whilst on work placement
- any problems and obstacles that the learner has encountered and actions they take to overcome them.

Information for learners on the reflective diary/log, along with a template they can use can be found in the Learner Guide (www.healthandcarelearning.wales).

Learners are allowed to take up to six sides (3 pages) of A4 notes into the assessment environment for Assignment 2. These notes must be produced by the learner and must relate to their sector experience. Learners should therefore be encouraged to use their reflective diary/log to produce these notes.

Support materials

A range of resources are available for these qualifications and can be accessed from the Consortium website at www.healthandcarelearning.wales. These include:

- Sample Assessment Materials
- Guidance for Teaching
- Learner Guide
- Centre Administration Guide.

Making entries

This is a unitised qualification which allows for an element of staged assessment. The external assessment (Unit 1) is available in January and May/June each year. First certification of the qualification will be available in summer 2020. Thereafter, the qualification will be available for certification after each January and May/June series.

Entries for the non-examination assessment (Unit 2) should be made in the May/June series.

For more information on the entry and certification process, please refer to the current edition of WJEC's Entry Procedures and Coding Information available from the WJEC website at www.wjec.co.uk/exam-officers.

Entry codes			
Unit title	Assessment	English-medium	Welsh-medium
Unit 1: Promoting health and well-being throughout the life stages	On-screen assessment	5972UA	5972NA
	Written assessment	5972UB	5972NB
Unit 2: Health and social care to support outcome-focused provision for person-centred care	Non-examination assessment	5972U2	5972N2
Qualification cash-in		5972Q0	5972C0

Arrangements for non-examination assessment (NEA)

Unit 2 is assessed through non-examination assessment (NEA) and centres must follow the Joint Council for Qualifications (JCQ) *Instructions for non-examination assessment*, a copy of which can be accessed from the JCQ website (www.jcq.org.uk). In line with these instructions, centres are required to have in place a non-examination assessment policy; this will be checked as part of the centre and qualification approval process.

There are three stages of non-examination assessment that are controlled:

- setting the assignment
- taking the assignment
- marking the assignment

Setting the assignments

Candidates must complete two assignments:

Assignment 1 includes a choice of two case studies available to centres from the WJEC secure website each year on the first Monday in January (from 2020 onwards).

Assignment 1 must not be provided to candidates until the start of the assessment. Candidates must not discuss or share information with others on the case study or tasks during the assessment window.

Assignment 2 is provided in Appendix A of this specification and will remain the same for the lifetime of this specification.

Taking the assignments

Centres will have some flexibility of when to schedule the non-examination assessment:

Assignment 1 needs to be completed during the assessment window.
Assignment 2 can be completed at the discretion of the centre when set sector engagement hours have been completed.

Centres need to ensure they have delivered the content required for candidates to be able to access available marks allocated to all aspects of each NEA, before candidates start the assignments.

Centres will need to ensure that candidates have completed the assignments (within the specified controls) and that work has been completed in adequate time for the work to be marked, marks uploaded to WJEC's Internal Assessment Mark Input System (IAMIS) and the sample dispatched to the moderator by the 11th of June each year.

It is the centre's responsibility to ensure that they have issued the correct Assignment 1 case studies for the academic year in which they are making entries.

Centres are required to manage and conduct internal assessments in line with the principles outlined in the JCQ document: *Instructions for conducting non-examination assessments*. There are five areas of assignment taking that are controlled: time, resources, supervision, collaboration and resit arrangements.

Time

Candidates should spend approximately 6 hours on Assignment 1 and 4 hours on Assignment 2. These times refer to work completed under direct supervision in the classroom. The sector engagement and work placement required for Unit 2, Assignment 2 is in addition to this time.

Evidence presented for Assignment 1 should be presented in approximately 2,500 words. Evidence presented for Assignment 2 should be presented in approximately 2,500 words.

Resources

For Assignment 2, candidates are allowed to take a copy of their Sector Engagement and Work Placement Record and up to six sides (3 pages) of A4 of additional notes into the assessment environment. Notes may be hand-written or word-processed. These notes should be in the candidate's own words and must relate specifically to the candidate's sector engagement activities including their work placement. Notes **must not** include pre-prepared answers to the tasks.

All notes used by the candidate must be retained by the centre and must be submitted for review as part of the moderation process.

The teacher/assessor is responsible for reviewing the notes that learners intend to take into the assessment environment and making sure that they are in line with the requirements above. If the teacher/assessor has any concerns regarding the authenticity of the notes they should stop the assessment from taking place and follow their own internal procedures for dealing with cases of suspected malpractice.

Centres should refer to the WJEC guidance *Malpractice-a guide for centres and the JCQ suspected malpractice in examinations and assessments policies and procedures* if they are unsure how to proceed.

Supervision

Candidates' work must remain within the centre at all times and must be stored securely between timetabled sessions.

Teachers may provide guidance and support to candidates to ensure that they have a clear understanding of the requirements of the NEA assignments and the associated marking criteria.

Once work is underway, feedback must be limited to general advice on what needs to be improved. Teachers must not provide specific guidance on how to make these improvements.

Once the assignment is finished and the final assessment made, no further amendments may be made. The time spent working on each NEA assignment should be recorded by the teacher as a log and this may be requested by WJEC in addition to the work submitted for moderation. The log should be monitored by the centre to ensure that candidates spend approximately 6 hours on Assignment 1 and 4 hours on Assignment 2.

Authentication

The teacher is responsible for informing candidates of WJEC regulations concerning malpractice. Candidates must not take part in any unfair practice in the preparation of work for this qualification.

Candidates must understand that to present material copied directly from books or other sources without acknowledgement will be regarded as deliberate deception. Centres must report suspected malpractice to WJEC if the candidate has signed the declaration of authentication form.

It is important that NEA work is rigorously monitored by centres to ensure that candidates' work is their own. Centres should monitor candidates' work by:

- keeping a careful record of progress during the timetabled sessions
- carefully considering whether the written evidence submitted is characteristic of the candidates' ability/attainment
- keeping work secure in the centre once the evidence (i.e. the report and the supportive evidence) is handed in
- ensuring work is not returned to the candidate to make changes.

All candidates are required to sign that work submitted is their own and teachers are required to confirm that the work is solely that of the candidate concerned and was conducted under the required conditions.

Collaboration

Candidates must not work together on any of their NEA assignments.

Resit arrangements

Candidates may resit the internally assessed unit once only. If a candidate chooses to resit the unit, they must resit both Assignment 1 and 2. Assignment 1 must be based

on the case studies released for the series in which the resit takes place. The candidate may use the same work experience placement as the basis for resitting Assignment 2. The resit must be completed within the same levels of control. Candidates cannot improve previously submitted work.

Marks for NEA may be carried forward for the life of the specification. If a candidate resits the NEA (rather than carrying forward the previous NEA mark), it is the new mark that will count towards the overall grade, even if it is the lower than a previous attempt.

Marking the assignment

Assignment 1 is internally assessed using the mark scheme released annually with the assignment.

Assignment 2 is internally assessed using the mark scheme in Appendix B.

Both assignments are externally moderated by WJEC. External moderation will be available in the summer series only. Assignment 1 and Assignment 2 must be submitted together for moderation together by the 11th of June each year.

Internal standardisation and moderation

Where there is more than one teacher in a centre, work from all teaching groups must be standardised internally. This is designed to ensure that the final assessment reflects a single agreed standard for all teaching groups involved at the centre.

Assessment grids and teacher annotations

When assessing the written evidence for each assessment, teachers should study the NEA mark grids and bands, which are designed to present a system that links the assessment objectives to marks and helps to discriminate clearly between varying levels of achievement.

Teachers are required to record separate marks for each section in the spaces provided on the mark sheet, to total the overall mark in the box provided and to make an overall summative comment.

Teacher annotations within the body of the written evidence, whilst not mandatory, are very useful to show where and why the marks have been awarded.

Examples of NEA will be issued by WJEC to help centres identify the quality of the work associated with various mark bands. These materials are intended for the use of internal assessors of NEA only and must not be shared with candidates.

Submission of marks and external moderation

Centres need to submit marks for NEA work online by a specified date in June of the year when the work is to be submitted for moderation. When the marks have been submitted to WJEC, the system will identify the sample of candidates whose work is selected for moderation.

Only the evidence from the candidates selected for the sample should be submitted. All other candidates' work must be retained at the centre. The coversheet must be signed by both the candidate and the teacher.

All candidates' work, not just the sample, must be authenticated internally by signing a coversheet.

Further details on the external moderation arrangements can be found in the most recent version of WJEC's Internal Assessment Guide, a copy of which can be found on the WJEC website (www.wjec.co.uk/exam-officers).

Centre feedback

Centres will receive detailed feedback from the moderation process in the form of an electronic report.

Grading, awarding and reporting

Level 2 Health and Social Care: Principles and Contexts is graded Pass, Merit, Distinction.

The qualification grade is awarded on the basis of the aggregation of the unit marks achieved. Results not attaining the minimum standard for the award will be reported as U (unclassified).

Individual unit results are reported on a uniform mark scale (UMS) with the following grade equivalences:

	Max. UMS	D	M	P	U
Unit 1 Examination	100	80	60	40	0
Unit 2 Non-examination assessment	150	120	90	60	0

	Max. UMS	D	M	P	U
Level 2 Health and Social Care: Principles and Contexts	250	200	150	100	0

Awarding and reporting of results for Level 2 Health and Social Care: Principles and Contexts takes place in March/August of each year. A qualification certificate will be issued at a later date confirming the title, level and grade of qualification.

Grade descriptors

Grade descriptors are provided to give a general indication of the standards of achievement likely to have been shown by candidates awarded particular grades. The descriptors must be interpreted in relation to the content specified in the specification; they are not designed to define that content. The grade awarded will depend in practice upon the extent to which the candidate has met these descriptors.

Shortcomings in some aspects of the examination may be balanced by better performances in others. Descriptors shown are those that are equivalent to threshold performance at each level of qualification and at the highest grade of Level 2. The Level 2 Merit grade is determined numerically.

Grades will be awarded on the basis of the following grade descriptors.

Level 2 Pass: Candidates recall, select and communicate knowledge and understanding of basic aspects of the health, social care and early years sectors. They review their evidence and draw basic conclusions. They apply basic knowledge and understanding and skills to give simple responses to queries and issues that impact upon the health, social care and early years sectors. Candidates evaluate evidence to draw basic conclusions in relation to issues in the sectors. The work may contain some inaccuracies or have omissions.

Level 2 Merit: Candidates recall, select and communicate sound knowledge and understanding of aspects of the health, social care and early years sectors. They review the evidence available, analysing and evaluating some of the information clearly, and with some accuracy. They make judgements and draw appropriate conclusions. They apply suitable knowledge and understanding in a range of situations to give mainly appropriate responses to queries and issues that have an impact on the health, social care and early years sectors. Candidates carry out some analysis of and draw conclusions in relation to issues in the sectors. The work may contain some minor inaccuracies or have omissions.

Level 2 Distinction: Candidates recall, select and communicate detailed knowledge and thorough understanding of the health, social care and early years sectors. They analyse and evaluate the evidence available, reviewing and adapting their methods where necessary. They present information clearly and accurately, making reasoned judgements. They apply relevant knowledge and understanding in a range of situations to give appropriate responses to queries and issues that have an impact on the health, social care and early years sectors. Candidates evaluate evidence to draw valid conclusions and make judgements in relation to issues in the sectors. The work is well-structured and clearly expressed.

Post-results services

Following the publication of results for each examination series, WJEC offers a range of post-results services relating to reviews of marking and moderation and access to examination scripts. Information on post-results services can be found on the Consortium website www.healthandcarelearning.wales.

Resits

Learners will be allowed one resit for the external examination with the higher grade contributing to the award of the qualification. Learners may resit the entire qualification multiple times. Marks for NEA may be carried forward for the life of the specification. If a candidate resits an NEA unit (rather than carrying forward the previous NEA mark), it is the higher mark that will count towards the overall grade.

Appendix A: NEA Assignment for Unit 2



Level 2 Health and Social Care: Principles and Contexts
Unit 2: Health and Social Care to support outcome-focused provision for person-centred care

Assignment 2

SAMPLE ASSESSMENT MATERIALS

APPROXIMATELY 4 HOURS

INSTRUCTIONS FOR CANDIDATES

You will have approximately 4 hours to complete the assignment and to produce a detailed report.

Your report should include knowledge and understanding gained from your sector engagement and classroom teaching.

Your report must be approximately 2,500 words.

Read the assignment tasks carefully to make sure you understand what is needed.

It is important that you work independently from other candidates and make sure the work you produce is your own unaided work.

Check your work carefully to make sure that it is accurate and correct.

INFORMATION FOR CANDIDATES

You may have access to your sector engagement log and notes you produced during your sector engagement activity including your work placement. You may bring a maximum of 6 sides (3 A4 pages) of notes into the assessment environment in addition to your sector engagement log.

There will be no access to the internet during the formal assessment time.

Sector engagement is to cover work placement and visits and health and social care workers visiting the schools/colleges to give presentations.

You and your teacher will be required to sign a declaration that all work presented is the work of the candidate alone.

Assignment 2: Work placement and sector engagement

Produce a report to include evidence of all tasks as shown below.

The tasks are based on your work placement and sector engagement.

Task (a) Select **two** health and social care workers from different settings that you have engaged with. **One** must be from your **work placement** setting and **one** from additional **sector engagement**. [8+8 marks]

Produce a summary for each health and social care worker that refers to:

- roles and responsibilities
- types of settings they may work in
- relevant career pathways
- qualities needed to carry out the role.

Task (b) (i) Define what is meant by person centred care. [2marks]

(ii) List **three** benefits to the individual of person-centred practice. [3 marks]

(ii) Explain how health and social care workers can promote person-centred practice and an outcome-focused approach to health and well-being. [9 marks]

Task (c) Explain how the setting(s) you have experienced support and promote **two** of the following: [15 marks]

- co-production
- the rights of individuals and carers in relation to their language needs and preferences
- safeguarding
- respect for the diversity and uniqueness of individuals
- choice and control in personal plans.

Task (d) Reflect on how your own knowledge and understanding has benefitted from undertaking a work placement and sector engagement. [15 marks]

You need to refer to:

- what you feel your strengths and weaknesses were during your work placement and sector engagement opportunities
- what **you** would do differently if your work placement and sector engagement were to be repeated.

Assignment 2: Total 60 marks

Appendix B: NEA Mark scheme for Unit 2 - Assignment 2

Unit 2: Health and social care to support outcome-focused provision for person-centred care

Mark scheme Assignment 2: Work Placement and Sector Engagement

<p>Task (a) Select two health and social care workers from different settings that you have engaged with. One must be from your work placement setting and one from additional sector engagement. [8+8marks]</p> <p>Produce a summary for each health and social care worker that refers to:</p> <ul style="list-style-type: none"> • roles and responsibilities • types of settings they may work in • relevant career pathways • qualities needed to carry out the role. 		
Band	AO1: <i>Demonstrate knowledge and understanding of health and social care, principles and contexts.</i>	
4	<p>7-8 marks</p> <p>An excellent, detailed summary of the roles and responsibilities of one health and social care worker. Excellent reference has been made to the types of settings they may work in, career pathways and qualities needed for each of the selected job roles.</p>	<p>7-8 marks</p> <p>An excellent, detailed summary of the roles and responsibilities of one other health and social care worker. Excellent reference has been made to the types of settings they may work in, career pathways and qualities needed for each of the selected job roles.</p>
3	<p>5-6 marks</p> <p>A good summary of the roles and responsibilities of one health and social care worker. Good reference has been made to the types of settings they may work in, career pathways and qualities needed for each of the selected job roles.</p>	<p>5-6 marks</p> <p>A good summary of the roles and responsibilities of one other health and social care worker. Good reference has been made to the types of settings they may work in, career pathways and qualities needed for each of the selected job roles.</p>
2	<p>3-4 marks</p> <p>A basic summary of the roles and responsibilities of one health and social care worker. Some reference has been made to the types of settings they may work in, career pathways and qualities needed for each of the selected job roles.</p>	<p>3-4marks</p> <p>A basic summary of the roles and responsibilities of one other health and social care worker. Some reference has been made to the types of settings they may work in, career pathways and qualities needed for each of the selected job roles.</p>
1	<p>1-2 marks</p> <p>A limited summary of the roles and responsibilities of one health and social care worker. Limited reference has been made to the types of settings they may</p>	<p>1-2 marks</p> <p>A limited summary of the roles and responsibilities of one other health and social care worker. Limited reference has been made to the types of settings they</p>

	work in, career pathways and qualities needed for each of the selected job roles.	may work in, career pathways and qualities needed for each of the selected job roles.
	0 marks Not creditworthy or not attempted.	
	<p>Answers to the first three bullet points will be dependent upon the different health and social care settings with which the learner has engaged.</p> <p>In reference to the final bullet point answers may refer to: Qualities required to be a health and social care worker. To include:</p> <ul style="list-style-type: none"> • attentiveness • be able to work with others • dedication • empathy • flexibility • honesty • passion • patience • positivity • reliability • sense of humour • sensitive to the needs of others • show respect for others • willing to learn. 	

Task (b)	(i) Define what is meant by person centred care. [2 marks]
Band	AO1: <i>Demonstrate knowledge and understanding of health and social care, principles and contexts.</i>
	<p>Award 2 marks for a good definition which shows clear knowledge and understanding of what person-centred care is.</p> <p>Award 1 mark for a basic definition which shows some knowledge and understanding of what person-centred care is.</p> <p>Award 0 marks Not creditworthy or not attempted.</p> <p>Answer may refer to:</p> <p>Person-centred care is an approach that views individuals using health and social care services as equal partners in planning, developing and monitoring their care to make sure it meets their needs.</p>

Task (b)	(ii) List three benefits to the individual of person-centred practice. [3 marks]
Band	AO1: <i>Demonstrate knowledge and understanding of health and social care, principles and contexts.</i>
	<p>Award 1 mark up to a maximum of 3 for each valid benefit listed.</p> <p>Award 0 marks Not creditworthy or not attempted.</p> <p>Answers may refer to:</p> <ul style="list-style-type: none"> • may improve an individual’s health and well-being outcomes • promotes respect for the wishes of the individual • allows the individual to make informed choices • flexibility of services • meets the diverse needs of different people • ensures the care for individuals is suited to their wants and needs • ensures that individuals feel cared for physically and emotionally.

Task (b) (iii) Explain how health and social care workers can promote person-centred practice and an outcome-focused approach to health and well-being. [9 marks]	
Band	AO2: Apply knowledge and understanding of health and social care, principles and contexts.
4	<p style="text-align: center;">7-9 marks</p> <p>An excellent, detailed explanation of how health and social care workers can promote person-centred practice and an outcome-focused approach to health and well-being. Explanation shows excellent application of knowledge and understanding.</p>
3	<p style="text-align: center;">5-6 marks</p> <p>A good explanation of how health and social care workers can promote person-centred practice and an outcome-focused approach to health and well-being. Explanation shows good application of knowledge and understanding.</p>
2	<p style="text-align: center;">3-4 marks</p> <p>A basic explanation of how health and social care workers can promote person-centred practice and an outcome-focused approach to health and well-being. Explanation shows basic application of knowledge and understanding.</p>
1	<p style="text-align: center;">1-2 marks</p> <p>A limited explanation of how health and social care workers can promote person-centred practice and an outcome-focused approach to health and well-being. Explanation shows limited application of knowledge and understanding.</p>
	<p style="text-align: center;">0 marks</p> <p>Not creditworthy or not attempted.</p>

Task (c)	<p>Explain how the setting(s) you have experienced support and promote two of the following: [15 marks]</p> <ul style="list-style-type: none"> • co-production • the rights of individuals and carers in relation to their language needs and preferences • safeguarding • respect for the diversity and uniqueness of individuals • choice and control in personal plans.
Band	<p>AO2: <i>Apply knowledge and understanding of health and social care, principles and contexts.</i></p>
4	<p style="text-align: center;">12-15 marks</p> <p>An excellent, detailed explanation of how the setting(s) the learner has experienced support and promote any two of the named areas listed.</p>
3	<p style="text-align: center;">8-11 marks</p> <p>A good explanation of how the setting(s) the learner has experienced support and promote any two of the named areas listed.</p>
2	<p style="text-align: center;">4-7 marks</p> <p>A basic explanation of how the setting(s) the learner has experienced support and promote any two of the named areas listed.</p>
1	<p style="text-align: center;">1-3 marks</p> <p>A limited explanation of how the setting(s) the learner has experienced support and promote any two of the named areas listed.</p>
	<p style="text-align: center;">0 marks</p> <p>Not creditworthy or not attempted.</p>
	<p>Award a maximum of 8 marks if only one named area is explained.</p>

Task (d) Reflect on how your own knowledge and understanding has benefitted from undertaking a work placement and sector engagement. **[15 marks]**

You may wish to refer to:

- what you feel your strengths and weaknesses were on your work placement(s) and sector engagement
- what you would do differently if your work placement(s) and sector engagement were to be repeated.

Band	AO3: Analyse and reflect on aspects of health and social care, principles and contexts
4	<p style="text-align: center;">12-15 marks</p> <p>An excellent and detailed reflection on how their own knowledge and understanding has benefitted from undertaking a work placement and sector engagement.</p> <p>A clear, detailed reflection is provided which addresses strengths, weaknesses and makes valid recommendations for improvement.</p>
3	<p style="text-align: center;">8-11 marks</p> <p>A good reflection of how their own knowledge and understanding has benefitted from undertaking a work placement and sector engagement.</p> <p>The reflection is well-explained, and reference is made to strengths, weaknesses and recommendations for improvement, but detail may vary.</p>
2	<p style="text-align: center;">4-7 marks</p> <p>A basic reflection of how their own knowledge and understanding has benefitted from undertaking a work placement and sector engagement.</p> <p>The reflection is brief and lacks detail. Basic reference may be made to strengths, weaknesses and/or recommendations for improvement.</p>
1	<p style="text-align: center;">1-3marks</p> <p>A limited reflection of how their own knowledge and understanding has benefitted from undertaking a work placement and sector engagement.</p> <p>The reflection is simplistic and brief and may not refer specifically to strengths, weaknesses or recommendations for improvement.</p>
	<p style="text-align: center;">0 marks</p> <p>Not creditworthy or not attempted.</p>